

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765116

FILED
Apr 30, 2007
Secretary of State

Entity Name: COTE DE LA MER RESIDENTIAL ASSOCIATION, INC.

Current Principal Place of Business:

170 CELESTIAL WAY
JUNO BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

C/O PRIME MGMT GROUP, INC
400 TONEY PENNA DRIVE
JUPITER, FL 33458 US

New Mailing Address:

C/O JUPITER MANAGEMENT, LLC
1340 U.S. HIGHWAY #1, SUITE 102
JUPITER, FL 33469 US

FEI Number: 59-2840582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDS, GARY D ESQ
ADMIRALITY TOWER, 4400 PGA BLVD
SUITE 900
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEARON, DAN
Address: 170 CELESTIAL WAY 1-1
City-St-Zip: JUNO BEACH, FL 33408

Title: S/T () Delete
Name: COCCHINI, BETTY
Address: 170 CELESTIAL WAY 7-4
City-St-Zip: JUNO BEACH, FL 33408

Title: VP () Delete
Name: MURPHY, ROSEMARY
Address: 170 CELESTIAL WAY 4-6
City-St-Zip: JUNO BEACH, FL 33408

Title: D () Delete
Name: ALFRED, WENDELL
Address: 170 CELESTIAL WAY, UNIT 8-1
City-St-Zip: JUNO BEACH, FL 33408

Title: D (X) Delete
Name: ORTIZ, SERAFIN DR
Address: 170 CELESTIAL WAY, UNIT 2-3
City-St-Zip: JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: COOK, JENNI
Address: 170 CELESTIAL WAY, UNIT 6-3
City-St-Zip: JUNO BEACH, FL 33408

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETTY COCCHINI

S/T

04/30/2007

Electronic Signature of Signing Officer or Director

Date